BILL DESCRIPTION FORM

Provide a signed hard copy to the Clerk of the Senate Committee on Finance located at 219 Dirksen SOB and a PDF version sent via email to mtb2009@finance-dem.senate.gov not later than five business days after the date of introduction of the bill. Please be aware that this form will be made available to the public, media, and any other interested parties.

modi	line to introduce bills is on Octob	etober 26, 2009. I am aware that the er 30, 2009. If the bill referenced above is a ed bill to reflect technical changes, please indicate		
Part II.	The bill referenced above is:	(please check one only)		
	X a new temporary duty suspension or temporary duty reduction ☐ an extension of an existing temporary duty suspension or temporary duty reduction ☐ a reliquidation in an instance of customs error and for which no litigation is pending ☐ a technical correction to U.S. tariff laws			
Part III.	Name of proponent(s):	Phone/email:		
	Beth DeBrosse Director, Government Relation American Iron & Steel Institut 1140 Connecticut Avenue, N. Suite 705 Washington, D.C. 20036	te		
Part IV.	The bill referenced above:			
	X has a companion bill in the House of Representatives: H.R. <u>3885</u> . □ does <u>not</u> have a companion bill in the House of Representatives.			
Part V.	If the Committee has a technical question concerning the bill, who should the Committee contact on your staff?			
	Wu, Sylvia (Specter), 202-224-9006; sylvia_wu@specter.senate.gov			
al	in feet	. 11/03/09		
(Member Signature)		Date		
Senator Arler (Print Membe				

LIMITED TARIFF BENEFIT DISCLOSURE STATEMENT

Provide a signed hard copy to the Clerk of the Senate Committee on Finance located at 219 Dirksen SOB and a PDF version sent via email to mtb2009@finance-dem.senate.gov not later than five business days after the date of introduction of the bill. Please be aware that this form will be made available to the public, media, and any other interested parties.

Part I.	This form is being submitted for S. 1891, which I introduced in the Senate on			
	ctober 26, 2009. If the bill referenced above is a modification of a previously			
intro	troduced bill to reflect technical changes, please indicate the previous bill number h	ere:		
S	,			
Part II.	Please indicate the type of disclosure below: (Please check one only)			
1 411 11,	☐ The bill referenced in Part I is reasonably anticipated to benefit 10 or fewer			
	individuals or entities, and as such constitutes a Limited Tariff Benefit. (Com			
	III)	picto i art		
	X The bill referenced in Part I is reasonably anticipated to benefit more than 1	10		
	individuals or entities, and as such does not constitute a Limited Tariff Benefi			
	maximum of thinies, and as such does <u>not</u> to home a Billing a Turnir Benefit			
Part III.	Provide the information below in subparts A, B, and C if the bill referenced al	bove is a		
	Limited Tariff Benefit.			
A Antioino	pated Beneficiaries:			
A. Anticipa N/A	ateu Denenciaries.			
IVA				
	•			
B. Purpose	e of the Limited Tariff Benefit:			
N/A				
C. Financia	al Benefit Certification			
	☑ I hereby certify that neither I nor my immediate family has a financial inter	ract in the		
	above described limited tariff benefit.	rest in the		
	lu det 11/03/09			
(Member Sig		_		
,				
Senator Arle				
(Print Memb	iher name) .			